

METROPOLITAN NASHVILLE-DAVIDSON COUNTY, TENNESSEE

**SUBSTANTIAL AMENDMENT 3  
TO THE  
2018-2023 CONSOLIDATED PLAN  
FOR  
HOUSING AND COMMUNITY  
DEVELOPMENT  
AND  
THE NASHVILLE-DAVIDSON CARES ACT  
SUBSTANTIAL AMENDMENT 1  
TO THE  
2019-2020 ANNUAL UPDATE  
TO THE  
2018-2023 CONSOLIDATED PLAN  
(2019 ACTION PLAN – PROGRAM YEAR 2)**

**Prepared by:**

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**On Behalf of:**

The Metropolitan Government of  
Nashville and Davidson County  
June 12, 2020



**Substantial Amendment 3 to the 2018-2023 Consolidated Plan**

**And**

**The Nashville-Davidson CARES Act**

**Substantial Amendment 1 to the 2019-2020 Annual Update to the 2018-2023**

**Consolidated Plan**

**(2019 Action Plan – Program Year 2)**

**Executive Summary** **ES1**

**Action Plan** **AP1**

**Appendices:**

**Appendix A – Summary of consultations Comments and Responses**

**Appendix B – Public Notice**

**Appendix C – Summary of Public Comments and MDHA Responses from Public  
Hearing**

**Appendix D – Citizens Participation Plan**

## Executive Summary

### ES-05 Executive Summary - 24 CFR 91.200(c), 91.220(b)

#### 1. Introduction

The Coronavirus Aid, Relief and Economic Security (CARES) Act Public Law 116-136 was signed by President Trump on March 27<sup>th</sup>, 2020. The Act identified additional funding for the Community Development Block Grant (CDBG-CV) Emergency Solutions Grant (ESG-CV), and the Housing Opportunities for Persons with AIDS (HOPWA-CV) programs to be used to respond to the Coronavirus outbreak. HUD's distribution plan for the additional funding includes multiple phases: an initial phase to allow for quick access to funding to address the immediate crisis resulting from the rising pandemic, as well as later phases that would support post-pandemic community recovery.

The Metropolitan Development and Housing Agency (MDHA) is designated as the lead agency for the development and administration of the Consolidated Plan and its' related programs, including funds provided via the CARES Act. Within MDHA, these functions are undertaken by the Community Development Department.

To expedite access to these funds, HUD directed Grantees to prepare a substantial amendment to their latest, approved action plan to allocate the CDBG-CV and HOPWA-CV funds to eligible activities/projects. This Nashville-Davidson CARES Act substantial amendment 1 to the 2019-2020, Program Year (PY) 2, Action Plan (AP) incorporates the CARES Act funding being received in the initial allocation, describes the projects/activities for use of the funds, methods to distribute the funds, and serves as Metro Nashville's application to access the funds.

Additionally, it adds language to allow preference for housing rehabilitation programs to be provided to LMI households whose homes were damaged from the March 3, 2020 tornados that hit Metro Nashville-Davidson County and allow these programs to be used for reconstruction of properties determined not-feasible for rehabilitation.

HUD guidance allowed grantees to amend their Consolidated Plan Citizen Participation requirements to establish expedited procedures for amending consolidated plans in order to access the CDBG-CV and HOPWA-CV funds as quickly as possible.

Therefore, concurrent with this Nashville-Davidson CARES Act substantial amendment 1 to the 2019-2020 AP, MDHA prepared substantial amendment 3 to the 2018-2023 Consolidated Plan which adds a 7th priority goal of Disaster Recovery to be used to

track outcomes for activities related to of COVID-19 through the remaining time covered by the Plan and to amend the Citizen Participation Plan to include the five (5) day comment period as allowed by the CARES Act along with the other changes described and set forth in substantial Amendment 2 to the 2018-2023 Consolidated Plan. The revised Citizen Participation Plan is included as Appendix D of Nashville-Davidson CARES Act substantial amendment 1 to the 2019 Action Plan.

Per waivers received via the CARES Act, the ESG-CV funds are not subject to the consultation and citizen participation requirements. Thus, an Action Plan showing the use of these funds can be reviewed via MDHA's and Metro's websites by accessing the following links:

<http://www.nashville-mdha.org/wp-content/uploads/2015/02/ESG-CV-action-plan.pdf>

<https://www.nashville.gov/News-Media/News-Article/ID/9699/Emergency-Solutions-Grant-Action-Plan.aspx>

<https://www.nashville.gov/Social-Services/Homeless-Impact-Division.aspx>

<https://www.homelessnashville.com/post/emergency-solutions-grant>

<https://www.homelessnashville.com/funding-info-for-providers>

However, to ensure maximum transparency, the uses of the ESG-CV funds is also included in this substantial amendment and will be sent via electronic media to all contacts on the CoC's list serve.

Metro Nashville-Davidson County will receive the following amounts from the initial CARES Act allocations to prevent, prepare for and respond to the Coronavirus outbreak in Metro Nashville-Davidson County.

- \$3,125,875 Community Development Block Grant Coronavirus (CDBG-CV) funds, This initial allocation of CDBG\_CV funding will be used to provide up to three (3) months of Emergency Housing Assistance for households in danger of eviction or foreclosure because they have or will fall behind in rent or mortgage payments because of loss of income due to COVID-19 and eligible administrative expense. Any subsequent CDBG-CV allocations may be allocated toward the lease or acquisition and retrofit of a facility to allow social distancing and isolation to prevent the spread of COVID-19 amongst the homeless population and eliminate the strain on existing shelters and provided associated homeless services.
- \$1,549,066 Emergency Solutions Grant (ESG-CV), These funds are to be used for all eligible ESG-CV activities, and

- \$225,186 Housing Opportunities for Person with HIV/Aids (HOPWA) in additional funds to enable Metro Nashville-Davidson County. These funds are to be used for all eligible HOPWA activities.

## **2. Summary of the objectives and outcomes identified in the Plan**

As part of substantial amendment 3 to the 2018-2023 Consolidated Plan, MDHA is proposing to add a 7th priority goal of the Strategic Plan of Disaster Mitigation/Recovery in response to COVID-19 to be used to track outcomes for activities related to of COVID-19, as needed, through the remaining time covered by the plan.

The priority goal of Disaster/Mitigation/Recovery in response to COVID-19 includes the priority needs listed below for the COVID-19 response and implementation. Subsequent detailed projects and activities funded via the CARES Act were established based on input from community stakeholders and are shown in the AP20, AP35 and AP38 sections of the substantial amendment.

- COVID-19 Prevention Measure Opportunities
- COVID-19 Mitigation Preparation Opportunities
- COVID-19 Mitigation Response Opportunities
- COVID-19 Specific Administration and Planning

Specific objectives related to each COVID-19 goal are discussed in Section AP 20 of this substantial amendment.

## **3. Summary of citizen participation process and consultation process**

To ensure the activities and use of CARES Act funds best align with the needs of the community, considering funding constraints and resources anticipated to be available from other resources, MDHA consulted with Metro Departments and various agencies in the community providing services to respond to the Coronavirus to obtain input prior to preparing this substantial amendment.

To determine the best use of the CDBG-CV funds, MDHA worked with representatives from the Mayor's office and Metro Nashville's Office of Emergency Management to determine local needs that were eligible for funding and/or reimbursement from CDBG-CV funds that would not be funded from other resources such as FEMA, TEMA, etc. Additionally, MDHA sent out a survey to 826 stakeholders asking them to rank by priority (0 being the lowest and 5 being the highest) potential uses of CDBG-VD funds

for activities within the following categories: public facilities and improvements; assistance to businesses; and public services. This survey produced 74 responses that MDHA then used to determine the activities to be funded with the CDBG-CV funds. A copy of the survey and responses are included in Appendix A of this substantial amendment.

MDHA consulted current HOPWA sponsors to determine priorities for the best use of the HOPWA-CV funds for the activities that are included in this substantial amendment.

Upon notification of the ESG-CV allocation, MDHA reached out to local stakeholders, State, and Federal offices, the Metropolitan Homeless Impact Division, the Continuum of Care (CoC), homeless shelters and nonprofit agencies for consultation regarding the priority needs in the community to address COVID-19 issues. Additionally, MDHA surveyed CoC and ESG funded agencies to gauge community needs. As a result of this community input, a list of priority needs was developed and verified for eligibility under ESG activities. MDHA then used this priority list to create the list of anticipated eligible activities. The list of needs and stakeholder responses can be found in Appendix A of this substantial amendment

Additionally, comments on the draft substantial amendments to the Consolidated Plan and 2019 Action Plan were obtained during the public comment period (June 12 through June 19, 2020) and at the virtual public hearing that was held on June 17, 2020. Details about the public hearing are provided in the Public Notice provided in Appendix B of this substantial amendment.

Information on how persons with disabilities or sensory impairments or those in need of translation services can request accommodation is provided in all Public Notices, in emails advertising community meetings/public input sessions, and posted on the Consolidated Plan webpage in Spanish, Chinese, Vietnamese, Arabic, and Somali. MDHA will make every effort to accommodate reasonable requests.

Following the conclusion of the Public Comment Period, the substantial amendments to the Consolidated Plan and 2019 Action Plan incorporating the CARES Act funding will be presented to the Metropolitan Council for approval, prior to submittal to HUD.

#### **4. Summary of public comments**

A summary of comments received from stakeholders during the consultation process is provided in Appendix A.

A summary of public comments on the draft substantial amendments to the Consolidated Plan and the 2019 Action Plan received at the virtual public hearing held on June 17, 2020 is provided in Appendix C.

## 5. Summary of comments or views not accepted and the reasons for not accepting them

A summary of public comments or views received during the public hearing that were not accepted and the reasons for not accepting them is included in summary of public comments (Appendix C).

## 6. Summary

The Coronavirus Pandemic has wreaked havoc on residents of Metro Nashville-Davidson County with the following ***statistics reported as of June 8, 2020:***

- Metro Public Health Department (MPHD) officials announced a total number of 6,228 confirmed cases of coronavirus disease (COVID-19) in Nashville/Davidson County., an increase of 72 in the past 24 hours. The confirmed cases range in age from 1 month to 100 years.
- A total of 72 people have died after a confirmed case of COVID-19.
- 4,741 individuals have recovered from the virus.

The economic toll for Metro Nashville-Davidson County is yet to be quantified, with the loss of revenue from shuttered businesses, not to mention lost revenue from cancelled events such as the South Eastern Conference (SEC) Basketball Tournament, concerts, etc. All of these closings and cancelations have resulted in lost wages to income earners in all categories, however, those in the restaurant and hospitality service industry have been hit particularly hard.

## PR-05 Lead & Responsible Agencies 24 CFR 91.200(b)

1. Describe agency/entity responsible for preparing the Consolidated Plan and those responsible for administration of each grant program and funding source

MDHA is responsible for preparing the Consolidated Plan and amendments thereto and the administration of each grant program and funding source, including the funding provided via the CARES Act.

Agency Role	Name	Department/Agency
CDBG-CV Administrator	NASHVILLE-DAVIDSON	MDHA Community Development Department
HOPWA-CV Administrator	NASHVILLE-DAVIDSON	MDHA Community Development Department
ESG-CV Administrator	NASHVILLE-DAVIDSON	MDHA Community Development Department

Table 1 – Responsible Agencies

### Narrative

By Resolution R94-1326, the Metropolitan Council designated MDHA as the lead agency responsible for the development and administration of the Consolidated Plan and its related grant programs. These functions are undertaken by MDHA's Community Development Department.

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## **PR-10 Consultation - 91.100, 91.200(b), 91.215(l)**

### **1. Introduction**

See number 1. In the ES-05, Executive Summary section of this Nashville-Davidson CARES Act substantial amendment 1 to the 2019-2020 AP.

## **PR-15 Citizen Participation**

### **1. Summary of citizen participation process/Efforts made to broaden citizen participation**

#### **Summarize citizen participation process and how it impacted goal-setting**

Based on HUD guidance, MDHA concurrent with this Nashville-Davidson CARES Act substantial amendment 1 to the 2019-2020 AP, proposes to amend the Consolidated Plan Citizen Participation requirements to allow for expedited procedures in order to access CDBG-CV and HOPWA-CV funds as quickly as possible.

Thus, MDHA prepared substantial amendment 3 to the 2018-2023 Consolidated Plan. MDHA is proposing to add the 7th priority goal of Disaster Mitigation/Recovery in response to COVID-19 to the Consolidated Plan to be used to track outcomes for activities related to of COVID-19 throughout the remaining time covered by the Plan and is proposing an amendment to the Citizen Participation Plan to include a five (5) day comment period as allowed by the CARES Act along with the other changes previously described and set forth in substantial amendment 2 to the 2018-2023 Consolidated Plan (substantial amendment 2 was available for public comment from March 10 – April 10, 2020). The proposed revised Citizen Participation Plan is included as Appendix D of this Nashville-Davidson CARES Act substantial amendment 1 to the 2019 Action Plan.

The Public Notice was advertised in *The Tennessean*, *The Tribune*, and *El Crucero* (a Spanish newspaper). In addition, the Notice was posted at MDHA's website ([www.nashville-mdha.org](http://www.nashville-mdha.org)). A copy of the notice is provided in Appendix B. The Notice was widely distributed via email to over 800 partners, government officials, nonprofit organizations, businesses, neighborhood groups, and citizens, whose email addresses have been provided to MDHA, and was sent to the Mayor's Office, and Members of the Metro Council. The public comment period, public hearing and reminders were publicized via MDHA's social media outlets. The public comment period opened on

June 12 and ran through June 19, 2020. A virtual public hearing was held on June 17, 2020.

Comments on the draft substantial amendments to the Consolidated Plan and 2019 Action Plan obtained during the public comment period are provided in Appendix C.

### Reasonable Accommodation

Information on how persons with disabilities or sensory impairments or in need of translation services could request accommodation was provided in the Public Notice and posted on the Consolidated Plan webpage in Spanish, Chinese, Vietnamese, Arabic, and Somali. MDHA will make every effort to accommodate reasonable requests.

The results of these outreach efforts are summarized in the following Table.

**Citizen Participation Outreach**

Sort Order	Mode of Outreach	Target of Outreach	Summary of response/ attendance	Summary of comments received	Summary of comments not accepted and reasons	URL (If applicable)
1	Newspaper Ad (The Tennessean)	Non-targeted/broad Community	N/A	N/A	N/A	
2	Newspaper Ad (The Tribune)	Minorities	N/A	N/A	N/A	
3	Newspaper Ad (El Crucero)	Non-English Speaking (Spanish)	N/A	N/A	N/A	
4	Internet Outreach (MDHA Website)	Non-targeted/broad Community	N/A	N/A	N/A	<a href="http://www.nashville-mdha.org">www.nashville-mdha.org</a>
5	Internet Outreach (Social Media)	Non-targeted/broad Community	N/A	N/A	N/A	
8	Other: Email Community Surveys	Non-targeted/broad community	See Appendix A	See Appendix A	See Appendix A	
9	Virtual Public Hearing June 17, 2020	Non-targeted/broad community	See Appendix C	See Appendix C	See Appendix C	

**Table 4 – Citizen Participation Outreach**

## Expected Resources

### AP-15 Expected Resources – 91.220(c)(1,2)

#### Introduction

HUD released the initial CARES Act allocation amounts on April 2, 2020. The amounts listed in the table below are based on these initial allocations. CDBG Program Income (PI) is estimated at 0 for CARES Act allocations.

#### Anticipated Resources

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 3				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
CDBG-CV	public - federal	Admin and Planning Economic Development Housing Public Improvements Public Services	\$3,125,875	0	0	\$3,125,875	0	Amount based on 4-2-2020 CDBG-CV allocation.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 3				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
HOPWA-CV	public - federal	Permanent housing in facilities Permanent housing placement Short term or transitional housing facilities STRMU Supportive services	\$225,186	0	0	\$225,186	0	Amount based on 4-2-2020 HOPWA-CV allocation.

Program	Source of Funds	Uses of Funds	Expected Amount Available Year 3				Expected Amount Available Remainder of ConPlan \$	Narrative Description
			Annual Allocation: \$	Program Income: \$	Prior Year Resources: \$	Total: \$		
ESG-CV	public - federal	Financial Assistance Overnight shelter Rapid re-housing (rental assistance) Rental Assistance Homelessness Prevention Services Transitional housing	\$1,549,066	0	0	\$1,549,066	0	Amount based on 4-2-2020 ESG-CV allocation.

Table 56 - Expected Resources – Priority Table

## SP-25 Priority Needs - 91.215(a)(2)

### Priority Needs Table 50 –

#### Priority Needs Summary

**10 Priority Need Name** COVID-19 Prevention Measure Opportunities

**Priority Level** - High

**Population**- Extremely Low, Low, Moderate, Large Families, Families with Children, Elderly, Chronic Homelessness Individuals, Families with Children, Mentally Ill, Chronic Substance Abuse, Veterans, Elderly, Frail Elderly, Persons with Mental Disabilities, Persons with Physical Disabilities, Persons with Developmental Disabilities, Persons with Alcohol or Other Addictions

**Geographic Areas Affected** Countywide

**Associated Goals** Disaster Mitigation/Recovery in response to COVID-19

**Description** In order to prevent, prepare for and respond to the Coronavirus outbreak as a condition of the CARES Act, additional priority need and goals have been added to the Consolidated Plan and 2019 Action Plan to address the concerns.

**Basis for Relative Priority** This is a new priority added to the Consolidated Plan as a result of the Coronavirus (COVID-19)

**11 Priority Need Name** COVID-19 Mitigation Preparation Opportunities

**Priority Level** - High

**Population**- Extremely Low, Low, Moderate, Large Families, Families with Children, Elderly, Chronic Homelessness Individuals, Families with Children, Mentally Ill, Chronic Substance Abuse, Veterans, Elderly, Frail Elderly, Persons with Mental Disabilities, Persons with Physical Disabilities, Persons with Developmental Disabilities, Persons with Alcohol or Other Addictions

**Geographic Areas Affected** Countywide

**Associated Goals** Disaster Mitigation/Recovery in response to COVID-19

**Description** In order to prevent, prepare for and respond to the Coronavirus outbreak as a condition of the CARES Act, additional priority need and goals have been added to the Consolidated Plan and 2019 Action Plan to address the concerns.

**Basis for Relative Priority** This is a new priority added to the Consolidated Plan as a result of the Coronavirus (COVID-19)



**12 Priority Need Name** COVID-19 Mitigation Response Opportunities

**Priority Level** - High

**Population-** Extremely Low, Low, Moderate, Large Families, Families with Children, Elderly, Chronic Homelessness Individuals, Families with Children, Mentally Ill, Chronic Substance Abuse, Veterans, Elderly, Frail Elderly, Persons with Mental Disabilities, Persons with Physical Disabilities, Persons with Developmental Disabilities, Persons with Alcohol or Other Addictions

**Geographic Areas Affected** Countywide

**Associated Goals** Disaster Mitigation/Recovery in response to COVID-19

**Description** In order to prevent, prepare for and respond to the Coronavirus outbreak as a condition of the CARES Act, additional priority need and goals have been added to the Consolidated Plan and 2019 Action Plan to address the concerns.

**Basis for Relative Priority** This is a new priority added to the Consolidated Plan as a result of the Coronavirus (COVID-19)

**13 Priority Need Name** COVID-19 Specific Administration and Planning

**Priority Level** - High

**Population-** Extremely Low, Low, Moderate, Large Families, Families with Children, Elderly, Chronic Homelessness Individuals, Families with Children, Mentally Ill, Chronic Substance Abuse, Veterans, Elderly, Frail Elderly, Persons with Mental Disabilities, Persons with Physical Disabilities, Persons with Developmental Disabilities, Persons with Alcohol or Other Addictions

**Geographic Areas Affected** Countywide

**Associated Goals** Disaster Mitigation/Recovery in response to COVID-19

**Description** In order to prevent, prepare for and respond to the Coronavirus outbreak as a condition of the CARES Act, additional priority need and goals have been added to the Consolidated Plan and 2019 Action Plan to address the concerns.

**Basis for Relative Priority** This is a new priority added to the Consolidated Plan as a result of the Coronavirus (COVID-19)

**SP-45 Goals Summary – 91.215(a)(4)**

Goal 7 listed in the following table has been added as an additional five year goal of the 2018-2023 Consolidated Plan



Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
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Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
7	Disaster Mitigation/Recovery in response to COVID-19	2020	2023	Public Services	Countywide	COVID-19 Mitigation Response Opportunities	CDBG-CV: \$2,813,287	2000 Households assisted – 70% LMI
				Administration Planning		COVID-19 Mitigation Response Opportunities	CDBG-CV: \$312,587	N/A
7	Disaster Mitigation/Recovery in response to COVID-19	2020	2023	Support for Homeless and Persons with HIV/AIDS Non-Homeless Special Needs	Countywide Metropolitan Statistical Area	COVID-19 Prevention Measure Opportunities COVID-19 Mitigation Preparation Opportunities COVID-19 Mitigation Response Opportunities	HOPWA-CV: \$225,186 ESG-CV: \$1,394,160	Tenant-based rental assistance / Rapid Rehousing: 1625 Households Assisted Homeless Person Overnight Shelter: 10000 Persons Assisted Homelessness Prevention: 375 Persons Assisted HIV/AIDS Housing Operations: 265 Household Housing Unit
								<del>Other:</del>
Nashville-Davidson CARES Act Substantial Amendment 1 – 2019-2020 Program Year 2 Action Plan AP-8 MB Control No. 2506-0117 (06/30/2019)								13477 Other

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
7	Disaster Mitigation/Recovery in response to COVID-19	2020	2023	Administration	Countywide	COVID-19 Prevention Measure Opportunities  COVID-19 Mitigation Preparation Opportunities  COVID-19 Mitigation Response Opportunities	ESG-CV: \$154,906	Other: 13477 Other  N/A

## Annual Goals and Objectives

### AP-20 Annual Goals and Objectives

#### Goals Summary Information

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
1	Disaster Mitigation/Recovery in response to COVID-19	2020	2021	Public Services	Countywide	COVID-19 Mitigation Response Opportunities	CDBG-CV : \$2,813,287	2000 Households assisted – 70% LMI
2	Disaster Mitigation/Recovery in response to COVID-19	2020	2021	Administration Planning	Countywide	COVID-19 Specific Administration Planning	CDBG-CV: \$312,587	N/A
3 & 4	Disaster Mitigation/Recovery in response to COVID-19	2020	2021	Homeless Non-Homeless Special Needs	Countywide Metropolitan Statistical Area	COVID-19 Prevention Measure Opportunities  COVID-19 Mitigation Preparation Opportunities	HOPWA: \$225,186  ESG-CV: \$1,394,160	Tenant-based rental assistance / Rapid Rehousing: 325 Households Assisted

Sort Order	Goal Name	Start Year	End Year	Category	Geographic Area	Needs Addressed	Funding	Goal Outcome Indicator
		2020	2021	Administration	Countywide	COVID-19 Mitigation Response Opportunities  COVID-19 Specific Administration	ESG-CV: \$154,906	Homeless Person Overnight Shelter: 2000 Persons Assisted  Homelessness Prevention: 75 Persons Assisted  HIV/AIDS Housing Assistance: 68 Household Housing Unit  Other: 2845  N/A

Table 57 – Goals Summary

## Projects

### AP-35 Projects – 91.220(d)

#### Introduction

The following are proposed projects to be undertaken with CARES Act CDBG-CV, ESG-CV and HOPWA-CV utilizing 2020 allocations and amended description for the 2019 Homeowner Rehabilitation Project to allow for preference for March 3, 2020 tornado victims and reconstruction.

Projects	
#	Project Name
27	CDBG-CV - Administration & Planning
28	CDBG-CV – Public Services – Emergency Housing Assistance
29	HOPWA-CV - Housing Programs and Services
30	ESG-CV – Programs and Services

**Table 58 - Project Information**



## Describe the reasons for allocation priorities and any obstacles to addressing underserved needs

Funding priorities for CARES Act funds were established after community input.

Not only are funding priorities intended to address underserved needs as identified through public input, they are designed for implementation to be feasible and effective.

## AP-38 Project Summary

### Project Summary Information

<b>27</b>	<b>Project Name</b>	<b>CDBG-CV - Administration &amp; Planning</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Disaster Mitigation and Recovery in Response to COVID-19
	<b>Needs Addressed</b>	COVID-19 Specific Administration and Planning
	<b>Funding</b>	CDBG-CV: \$312,587
	<b>Description</b>	Funding to be used for oversight and administration of CDBG-CV programs, including monitoring, reporting, program evaluation, fair housing activities, and the development of the Consolidated Plan and annual updates and amendments. Planning includes studies, analysis, data gathering, and preparation of plans to help prevent, prepare for and respond to the coronavirus pandemic (COVID-19)
	<b>Target Date</b>	5/31/2022
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	N/A
	<b>Location Description</b>	Countywide
	<b>Planned Activities</b>	Funds to be used by MDHA as the lead agency for the development and administration of the Consolidated Plan programs specific to CDBG-CV funds. Administrative activities include grant management, monitoring, budgeting, and planning and executing CDBG-CV eligible activities. MDHA may choose to partner with another entity to undertake eligible planning activities.
<b>28</b>	<b>Project Name</b>	<b>CDBG-CV Public Services – Emergency Housing Assistance</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Disaster Mitigation and Recovery in Response to COVID-19
	<b>Needs Addressed</b>	COVID-19 Mitigation Response Opportunities

	<b>Funding</b>	\$2,813,287
	<b>Description</b>	Assistance to households in danger of eviction or foreclosure because they have or will fall behind in rent or mortgage payments because of loss of income due to COVID-19.
	<b>Target Date</b>	March 2020 – May 2021
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	2000 households – 70% LMI
	<b>Location Description</b>	Countywide
	<b>Planned Activities</b>	Pay up to 3 months' rent/mortgage payments for households with loss of income due to COVID-19. Program will be targeted to assist households that have either regained sufficient income or anticipate regaining sufficient income through return to and/or new employment to remain in their homes once payments are made. Payments will be made directly to landlord/mortgage company. A portion of the funding will be available for program delivery. Program will be administered by MDHA or via agreements through Subrecipients.
<b>29</b>	<b>Project Name</b>	<b>HOPWA-CV Housing and Supportive Services</b>
	<b>Target Area</b>	Metropolitan Statistical Area
	<b>Goals Supported</b>	Disaster Mitigation and Recovery in Response to COVID-19
	<b>Needs Addressed</b>	COVID-19 Mitigation Preparation Opportunities
	<b>Funding</b>	HOPWA - \$225,186
	<b>Description</b>	Housing; short-term rent, mortgage, and utility assistance (STRMU); supportive services for persons with HIV/AIDS and their families; program administrative costs incurred by MDHA and Sponsor agencies
	<b>Target Date</b>	June 2020 – May 2021

	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	-Facility Based Rental Assistance: 53 persons -STRMU: 275 persons -Supportive Services: 2,320 persons -Short-Term/Emergency Assistance – 15 persons
	<b>Location Description</b>	Persons with HIV/AIDS in the Nashville-Davidson—Murfreesboro-Franklin-MSA

**Planned Activities**

- \$22,518.60 Admin to be awarded to Sponsor agencies
- \$202,667.40 for the following eligible activities:
  - o Facility Based Rental/Housing Assistance– costs associated with the rental subsidy assistance of clients in project-based rental units OR facility-based housing assistance costs for leasing a transitional/short-term housing facility/unit (ex-hotels/motels)
  - o STRMU – reasonable rent and mortgage assistance payments that represent actual housing costs; assistance varies per client depending on funds available, tenant need, and program guidelines
  - o Tenant Based Rental Assistance – costs associated with the placement of clients in permanent housing in the private rental housing market; assistance covers a portion of the rent based upon Fair Market Rent or “reasonable rent” and operates similar to the Section 8 Housing Choice Voucher Program.
  - o Supportive Services - services including, but are not limited to, health, mental health assessments, permanent housing placement, drug and alcohol abuse treatment and counseling, day care, transportation assistance, employment assistance, personal assistance, nutritional services, intensive care when required, and assistance in gaining access to local, State, and Federal government benefits and services, except that health services may only be provided to individuals with acquired immunodeficiency syndrome or related diseases and not to family members of these individuals. Permanent Housing Placement assistance is also covered under Supportive Services.

Funding for all activities will be awarded via the following potential actions: a competitive Request for Applications process; a direct application process, direct contracting to eligible nonprofit sponsors, and other methods allowed under the OMB 2 CFR 200 regulations.

<b>30</b>	<b>Project Name</b>	<b>ESG-CV Programs and Services</b>
	<b>Target Area</b>	Countywide
	<b>Goals Supported</b>	Disaster Mitigation and Recovery in Response to COVID-19
	<b>Needs Addressed</b>	COVID-19 Prevention Measure Opportunities
	<b>Funding</b>	ESG-CV: \$1,549,066.00
	<b>Description</b>	Activities to support homeless persons - rapid re-housing and homeless prevention assistance, shelter operations/essential services, and outreach; program and HMIS administration to help prevent, prepare for, and respond to the coronavirus pandemic (COVID-19)
	<b>Target Date</b>	5/31/22
	<b>Estimate the number and type of families that will benefit from the proposed activities</b>	<ul style="list-style-type: none"> <li>-Rapid Re-housing: 325 persons</li> <li>-Homeless Prevention: 75 persons</li> <li>-Shelter Operations/Essential Services: 2,000</li> <li>-Outreach: 100 persons</li> </ul> <p>Numbers are estimates. Due to the unknown nature of the COVID-19 impact, these numbers could be much higher or lower dependent upon final activity programs and outcomes.</p>
<b>Location Description</b>	Countywide	

<p><b>Planned Activities</b></p>	<ul style="list-style-type: none"> <li>• Up to \$154,906.00 for Administration – retained by MDHA for general management, oversight, and coordination of ESG programs – 10% of ESG-CV allocation allowed under the CARES Act</li> <li>• \$1,394,160.00 for the following eligible activities: <ul style="list-style-type: none"> <li>o Rapid Re-housing Assistance – includes, but is not limited to, utilities, rental application fees, security deposits, etc. and other eligible activities as defined in the ESG regulations at 24 CFR, §576.104; §576.105 (Housing relocation and stabilization services) and §576.106 (Short term and medium-term rental assistance)</li> <li>o Homeless Prevention includes, but is not limited to, rental assistance (such as arrears) and housing relocation and stabilization services, etc., and other eligible activities as defined in the ESG regulation at 24CFR, §576.103; §576.105 (Housing relocation and stabilization services) and §576.106 (Short term and medium-term rental assistance)</li> <li>o Shelter Operations* - include, but are not limited to, maintenance, rent, repair, renovation and/or conversion etc., and other eligible activities as defined in ESG regulations at 24 CFR §576.102</li> <li>o Essential Services* – include, but are not limited to, case management, childcare, education services, etc., and other eligible activities as defined in ESG regulations at 24 CFR, §576.102</li> <li>o Street Outreach* – includes, but is not limited to, the cost of engagement, case management, emergency health and mental health, etc. and other eligible actives as defined in the ESG regulation at 24 CFR, §576.101</li> <li>o HMIS – for costs associated with providing technical assistance and training, data review, input, and quality control for ESG subrecipients</li> </ul> </li> </ul> <p>*The cap for Operations, Essential Services and Street Outreach is waived for CARES Act funds. No limitations on these categories. Preference for activities will be given to priorities identified in conjunction with Metropolitan Government and the Office of Emergency Management (OEM) that will contributecontribute to the larger Nashville-Davidson County Homelessness Plan for alleviating COVID-19 concerns.</p> <p>Funding for all activities, except Administration, will be awarded via the following potential actions: a competitive Request for Applications process; a direct application process, direct contracting to eligible nonprofit subrecipients, and other methods allowed under the OMB 2 CFR 200 regulations.</p>
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		<p>Contribute to the larger Nashville-Davidson County Homelessness Plan for alleviating COVID-19 concerns.</p> <p>Funding for all activities, except Administration, will be awarded via the following potential actions: a competitive Request for Applications process; a direct application process, direct contracting to eligible nonprofit subrecipients, and other methods allowed under the OMB 2 CFR 200 regulations.</p>
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## **AP-50 Geographic Distribution – 91.220(f)**

All CARES Act activities will provided throughout Metro Nashville-Davidson County.

## **Appendix A**

### **Summary of consultations Comments and Responses**

**SUMMARY OF**  
**2020 METRO NASHVILLE - DAVIDSON**  
**CARES ACT FUNDING COMMUNITY INPUT SURVEY RESULTS**

**Q1: Buildings and Improvements, Including Public Facilities**

Please rank the needs in accordance with which should have the highest priority for federal funding:

- Construct a facility for testing, diagnosis or treatment. (40%)
- Rehabilitate a community facility to establish an infectious disease treatment clinic. (36%)
- Rehabilitate or create a neighborhood facility space for localized access to needs. (32%)
- Rehabilitate a commercial building or closed school building to establish an infectious disease treatment clinic, e.g., by replacing the HVAC system. (31%)
- Acquire and quickly rehabilitate (if necessary) a motel or hotel building to expand the capacity of hospitals to accommodate isolation of patients during recovery. (31%)
- Make interim improvements to private properties to enable an individual patient to remain quarantined on a temporary basis. (28%)
- Acquire and rehabilitate, or construct a group living facility that may be used to centralize patients undergoing treatment. (26%)

**Q2: Assistance to Businesses, including Special Economic Development Assistance**

Please rank the following needs in accordance with which should have the highest priority for federal funding:

- Avoid job loss caused by business closures related to social distancing by providing short-term working capital assistance to small businesses to enable retention of jobs held by low- and moderate-income persons. (54%)
- Provide technical assistance, grants, loans and other financial assistance to establish, stabilize and expand microenterprises that provide medical, food delivery, cleaning and other services to support home health and quarantine. (44%)
- Provide grants or loans to support new businesses or business expansion to create jobs and manufacture medical supplies necessary to respond to infectious diseases. (29%)

**Q3: Public Services**

Please rank the following needs in accordance with which should have the highest priority for federal funding:

- Provide testing, diagnosis or other services at a fixed or mobile location. (69%)
- Emergency rental/mortgage assistance. (68%)

- Provide domestic violence services for persons forced to stay in close contact with abusers. (54%)
- Facilitate transportation or delivery services such as meal delivery, etc., to quarantined individuals or individuals that need to maintain social distancing due to medical vulnerabilities. (48%)
- Provide equipment, supplies, and materials necessary to carry out a public service related to responding to COVID-19. (47%)
- Establish additional food bank locations and increase provisions at those and existing locations. (47%)
- Increase the accessibility of mental health services for people struggling with the effect of isolation due to social distancing. (44%)
- Increase the capacity and availability of targeted health services for infectious disease response within existing health facilities. (41%)
- Carry out job training to expand the pool of health care workers and technicians that are available to treat disease within a community. (31%)
- Provide security programs to decrease crime as tensions mount during an extended stay at home mandates amidst periods of unemployment. (30%)

**Thank You for Participating. Please Provide Additional Comments Here:**

**Responses:**

- The need for process and procurement would delay any building projects, potentially beyond when they could make a difference in the community.
- Emergency rental assistance is paramount! If not, once landlords are able, they will evict in droves which will force people out into the community, increasing the likelihood of a resurgence of the virus. This type of potential mass evictions, could also lead to further destabilization of the community. Any funds spent on facilities or services should be done so looking toward the future. Don't spend funds rehabbing a building for a single purpose. The rehab should be done in such a manner that the facility could then be used for something else - like housing the homeless!!! But it could then be converted back if we find ourselves back in this type of situation again. The situation should not be over thought but also should not be acted upon with NO forethought.
- Please update security measures in neighborhoods which are deemed dangerous. Cameras and wooden fences on properties to deter unlawful trespassing. Not good to leave areas which single, elderly or disabled individuals in properties which are not secure. Strict fines for those that trespass and litter know MDHA properties. You guys are too lenient.
- I would love to see assistance for the middle class. If we don't get mortgage assistance we will be in the lower class needing ALL of the available services instead of just one!
- Federal funding could provide for much needed designated resources (i.e. Universities, etc) and agencies to better partner for building local and regional relief strategies since Feds don't provide much direction in 2020. Specifically TEMA could enjoin a more targeted and state to county to city approach so locals can organize responding partnership groups for critical tasks and strategies going forward after economic/social recoil.

- We need a emergency center in Edgehill community
- Provide grant funds to nonprofits to support Payroll of employee during the social distancing crisis. Provide testing center or weekly checks for summer programs that assist children to detect and Avoid the spread of COVID 19. along with testing center for children
- These things should have been the status quo in the United States for decades. That we even need to prioritize our health, welfare and safety over anything else in the richest country on earth is disgusting and tells me we desperately need new leadership in America.
- Top priorities: Acquire hotels to provide housing for people experiencing homelessness. Retrofit those hotels by adding kitchenettes to create permanent housing. I can't believe that assistance to our homeless neighbors is not even one of your options above.
- COVID-19 has reviled both strength and weakness in our non-profit providers. Moving forward non-profits can also retool and help provide the services need to individual effected by a pandemic and/or some other type of disaster.

**COVID-19 Wish List for  
People Experiencing  
Homelessness  
FEEDBACK**

	Catholic C	Salv Army	Oasis Ctr	M25	CARES	OTN	Community Care Fellowship	Contributor	Mary Parri: RITI	YWCA	TOTAL	
# on provided list				list good			list good					
<b>NOTE- Consider combining Food line below with related items #4 &amp; #7</b>												
Food, including grocery deliveries		1				1			1	1	1	5
Delivery of household items, including mattress		1										1
Transport- Lyft, Uber								1				1
Temp workers if staff get sick										1		1
Cleaning svces										1	1	2
1 Hotel/Motel vouchers to avoid mass shelters	1		1		1	1		1		1	1	7
2 Protective gear						1					1	2
3 Staffing needs							1	1 c. Drivers			a. at motels, 1 hsg nav	3
4 Food assistance/food boxes for people in motels/PSH units who are extremely vulnerable					1	1				1		3
5 Material for telehealth					1							1
6 Transportation for people with symptoms					1	1		1				3
7 meal service trucks for large encampments						1						1
8 Phones & chargers for encampments					1	1						2
9 Trash pick-up for encampments						1				1		2
10 Hygiene materials (cleaning, gloves, masks,	1				1	1				1	1	5
11 Gift cards for essentials /immediate need item	1				1			1				3
12 Move-in costs	1					1						2
13 Landlord/hotel damage mitigation	1				1							2
14 Prevention dollars for people who have lost their income		1				1		1		1		5
<b>Emphasis Focus prevention funding on formerly homeless recently moved into homeless-dedicated housing -Set Aside Vouchers, RRH funds, How's Nashville funds</b>												
Other Shelter for youth - extended stay hotel (\$7K/wk)			1									1
Other Landlord bonuses for renting to people experiencing		1										1
Other Hazard pay/supplemental case management, Outreach		1										1
Other Assure homeless get direct Economic Impact payments (up to 1,200/indiv)												1

**Mary Parrish Ctr**

Our greatest financial needs are:

1. Rental assistance for our Rapid Re-Housing Program.
2. Basic needs assistance which includes financial donations to cover the cost of food and basic utilities for both our Transitional Housing residents and our Rapid Re-Housing Residents.

Food related	9	
Hotel/Motel vouchers to avoid ma	7	Nursing home will offer this, as well as foundation \$ to CCF
Hygiene materials (cleaning, glo	5	
Prevention dollars for people who	5	

**Focus prevention funding on formerly homeless recently moved into homeless-dedicated housing -Set Aside Vouchers, RRH funds, How's Nashville funds**

Transportation	3	WeGo & Nhood Health
Gift cards for essentials /immediat	3	

Staff for nursing home focused on 3  
 Primary health care- encampments- expand street medicine  
 Housing placement staff for fairgds??

Support State Faith-Based Homeless Task Force Opening Up Phase 4?

## **Appendix B**

### **Public Notice**

## PUBLIC NOTICE

### REQUEST FOR PUBLIC COMMENT AND NOTICE OF VIRTUAL PUBLIC HEARING

In accordance with 24 CFR 91.05(c)(2) and subpart B of the federal regulations relative to citizen participation for Community Planning and Development Programs and applicable waivers made available to those requirements through the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), the Metropolitan Development and Housing Agency (MDHA) is making substantial amendment 3 to the 2018- 2023 Housing and Community Development Consolidated Plan (Consolidated Plan) for the Metropolitan Government of Nashville and Davidson County and the Nashville-Davidson CARES Act substantial amendment to the 2019 Action Plan to allocate the original round of CARES Act funds to eligible projects/activities, allow preference for the homeowner rehabilitation program to be provided to Low- and Moderate-Income (LMI) households whose homes were damaged from the March 3, 2020 tornados that hit Davidson County, and allow the program to be used for reconstruction of properties determined unfeasible for rehabilitation. The public is hereby notified that these amendments are available for review through this notice.

**Virtual Public Hearing:** MDHA will host a virtual public hearing on these amendments at:

**2 p.m. CDT Wednesday, June 17, 2020, via  
[gotowebinar.com](https://gotowebinar.com)**

Please register for this virtual public hearing at:

<https://attendee.gotowebinar.com/register/8025770085466013196>

After registering, you will receive a confirmation email containing information about joining the webinar.

**Public Comment Period:** The draft substantial amendment 3 to the Consolidated Plan and the Nashville-Davidson CARES Act substantial amendment to its 2019 Action Plan to allocate the original round of CARES Act funds to eligible projects/activities and rehabilitation preference for tornado victims was made available for public examination and comment on Friday, June 12, 2020.

Members of the public may download copies from MDHA's website at [www.nashville-mdha.org/consolidated-plan](http://www.nashville-mdha.org/consolidated-plan) or may request copies by contacting the MDHA Community Development Department at 615-252-8505 or Telephone Device for the Deaf (TDD) at 615-252-8599.

MDHA will receive written comments through 4 p.m. CDT on Friday, June 19, 2020. See below for various ways to submit comments:

- Electronically at [consolidatedplan@nashville-mdha.org](mailto:consolidatedplan@nashville-mdha.org);
- Faxed to 615-252-8533 (Attention: Consolidated Plan);
- Mailed to MDHA Community Development Department, Attention: Consolidated Plan, P.O. Box 846, Nashville, TN 37202. Mailed comments must be postmarked no later than June 2, 2020;



- Hand-delivered via a drop box outside MDHA's Community Development Department, Attention: Consolidated Plan, 712 S. Sixth St., Nashville TN 37206.

**Purpose and Anticipated Resources:** This is substantial amendment 3 to the Consolidated Plan and the Nashville-Davidson CARES Act substantial amendment to the 2019 Action Plan to allocated the first round of CARES Act funds to eligible projects/activities to enable Metropolitan Nashville and Davidson County to receive and administer \$3,125,875 in Community Development Block Grant Coronavirus (CDBG-CV), \$1,549,066 in Emergency Solutions Grant (ESG-CV) and \$225,186 in Housing Opportunities for Persons with AIDS (HOPWA-CV) funding from the U.S. Department of Housing and Urban Development (HUD) made available through the CARES Act. Additionally, it adds language to allow preference for housing rehabilitation programs to be provided to LMI households whose homes were damaged from the March 3, 2020 tornados that hit Davidson County and allows these programs to be used for reconstruction of properties determined unfeasible for rehabilitation.

Additional CDBG-CV, ESG-CV and HOPWA-CV funding made available to the Metropolitan Government of Nashville and Davidson County by HUD through the CARES Act is unknown as this time, but will be used for the same purpose as the initial allocations indicated above which is to prevent, prepare for and respond to urgent needs from the spread of the coronavirus (COVID-19) and facilitate assistance to eligible households and persons economically impacted by COVID-19.

CDBG-CV funds will be used to provide subsistence payments defined at 24 CFR 570.207(b)(4) for rent/mortgage payments for LMI households and households having an urgent need due to a loss of income resulting from the spread of the coronavirus and administration. The specific allocations are detailed in the Nashville-Davidson CARES Act substantial amendment to the 2019 Action Plan.

Eligible ESG-CV activities include street outreach, emergency shelter operations and essential services, homelessness prevention, rapid re- housing, Homeless Management Information System and administration. Specific allocations and activities are detailed in the Nashville-Davidson CARES Act substantial amendment to the 2019 Action Plan.

Eligible HOPWA-CV activities include facility-based rental assistance, tenant based rental assistance, short-term rent mortgage assistance (STRMU); supportive services and short-term/emergency assistance and administration. Specific allocations and activities are detailed in the Nashville-Davidson CARES Act substantial amendment to the 2019 Action Plan.

Further, eligible CDBG-CV, ESG-CV and HOPWA-CV funds may be used to cover or reimburse costs incurred by the Metropolitan Government of Nashville and Davidson County, as the grantee, paid for with nonfederal funds to prevent, prepare for and respond to coronavirus regardless of the date on which such costs were incurred. These pre-award costs will meet all HUD requirements applicable to CDBG-CV, ESG-CV and HOPWA-CV, including those under the CARES Act.

Public notices regarding future amendments to the Consolidated Plan will be printed in local newspapers and posted online on MDHA's website at [www.nashville-mdha.org/consolidated-plan](http://www.nashville-mdha.org/consolidated-plan).

Specific activities using ESG-CV funding under the CARES Act do not require a five-day public comment period but are posted on Metro's and MDHA's websites and included in the Nashville-Davidson CARES Act substantial amendment to the 2019 Action Plan..

Lastly, as part of this amendment, MDHA has added a seventh priority goal of Disaster Recovery to the Consolidated Plan to be used to track outcomes for activities related to COVID-19 and to revise the Citizen Participation Plan to include the five-day comment period as allowed by the CARES Act along with the other changes described and set forth in substantial amendment 2 to the 2018-2023 Consolidated Plan. The revised Citizen Participation Plan is included as Appendix D of the Nashville-Davidson CARES Act substantial amendment to the 2019 Action Plan to allocate the initial allocations of

CARES funds to eligible projects/activities and allow preference for housing rehabilitation programs to be provided to LMI households whose homes were damaged from the March 3, 2020 tornados that hit Davidson County and allows these programs to be used for reconstruction of properties determined unfeasible for rehabilitation.

Request for Accommodations: MDHA makes every effort to provide reasonable accommodations to assist persons with disabilities. Any person needing assistance in accessing this information or who has other needs that require special accommodations may contact 615-252-8562 or TDD at 615-252-8599.

Para asistencia en Español llame al 615-252-8505.

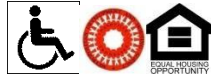
如果需要本通知的中文翻译，请打电话 615-252-8505

Để nhận một bản dịch Tiếng Việt của thông báo này, vui lòng gọi: 615-252-8505

للحصول على جرتمة رعية لهذا البيان، يرجى الإتصال ب: 615-252-8505

Haddii aad rabto qoraalkan oo af-Soomaali lagu tarjumay haddii aad doonayso fadlan naga soo wac: 615-252-8505

Statement of Non-Discrimination: MDHA does not discriminate on the basis of age, race, sex, sexual orientation, gender identity, genetic information, color, national origin, religion, disability or any other legally protected status in admission to, access to, or operations of its programs, services, or activities.



## **Appendix C**

### **Summary of Public Comments**

**And**

### **MDHA Responses from Public Hearing**

**The following comment was received via email on 6-16-2020**

Thank you for considering the following comments:

With respect to populations for all priority needs. All people experiencing homelessness, not simply those experiencing chronic homelessness should be included, with highest priority to the named groups who are experiencing homelessness. Priority focus should be to Extremely Low Income households, not Low Income or Moderate Income unless all ELI households have been served.

Evidence for deep targeting of assistance, in general and for item 28 is summarized here:

[http://www.evidenceonhomelessness.com/wp-content/uploads/2019/02/Homelessness\\_Prevention\\_Literature\\_Synthesis.pdf](http://www.evidenceonhomelessness.com/wp-content/uploads/2019/02/Homelessness_Prevention_Literature_Synthesis.pdf)

**Item 28**

The plan states that rental and mortgage assistance is targeted to: “households that have either regained sufficient income or anticipate regaining sufficient income through return to and/or new employment to remain in their homes once payments are made.”

However research shows that efforts to prevent of homelessness has greatest impact when given to those who are neediest rather than those most likely to manage with minimal assistance. Rather than targeting those who have or anticipate regaining income through employment, MDHA could prevent more homelessness by targeting ELI households.

**Item 29**

The greatest need is for rental assistance and services (housing placement) directly related to housing for people experiencing homelessness. Other services are likely to be useful only after people are housed. The balance between housing and supportive services should be adjusted.

**Item 30**

Wherever possible short-term rapid re-housing should serve as a bridge to permanent housing. Recipients should be given priority for permanent housing (Housing Choice Vouchers and project-based housing) controlled by MDHA. MDHA should commit to a preference for people experiencing homelessness.

**MDHA Response:**

CDBG Coronavirus (CDBG-CV) funding includes prioritization for all low income families who have been impacted by the COVID-19. Nashville-Davidson County has been awarded a total of \$10,038,745 in Emergency Solutions Grant coronavirus (ESG-CV) funding through the CAREs Act. These special funds are to be used specifically to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19) among individuals and families who are homeless or receiving homeless assistance; and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts of COVID-19. This funding will be made available to nonprofit providers to provide rapid re-housing assistance, homeless prevention and essential services to individuals experiencing homelessness.

The recommendation to commit preference for people experiencing homelessness through MDHA’s housing choice voucher and project based housing programs will be directed to the appropriate staff person within MDHA who manages those programs.

**The following comment was received via email on June 18, 2020**

Good afternoon,

I am writing to provide comment on the CARES Action Plan, SUBSTANTIAL AMENDMENT 3 TO THE 2018-2023 CONSOLIDATED PLAN FOR HOUSING AND COMMUNITY DEVELOPMENT AND THE NASHVILLE-DAVIDSON CARES ACT SUBSTANTIAL AMENDMENT 1 TO THE 2019-2020 ANNUAL UPDATE TO THE 2018-2023 CONSOLIDATED PLAN (2019 ACTION PLAN – PROGRAM YEAR 2)

I am writing on behalf of myself as a resident of Davidson County, informed by the work I do in the community as a housing navigator, but my comments should not be construed as the opinions, goals, objectives, or thoughts of any of my employers.

**Additional Funding to Homelessness Communities Encouraged**

The amount of funding to homelessness services should increase. People living in communal living situations such as the encampments are at high risk of spreading the potentially fatal coronavirus to their neighbors both in the encampments and nearby. Several of these encampments are only steps away from crowded apartment complexes and retail locations in Rolling Mill Hills, Germantown, West Nashville, and Wedgewood-Houston. One large encampment is located directly adjacent to a Walmart Supercenter and Lowe's Home Improvement Warehouse. The potential for exposure far exceeds just among the encampments themselves and should be a public health priority. The best solution is to fund non congregant motel/hotel stays--where they can safely socially distance, isolate, quarantine, and practice proper hygiene--and connect trained housing navigators to residents to help them not exit back to encampments but into permanent, affordable housing.

This should be across funding sources, CBGB, ESG, and HOPWA. People experiencing homelessness and HIV-AIDS should be a priority to move into immediate, permanent housing.

**Temporary, Congregant Overflow Shelters Should Not Be Funded**

In addition, money should not be allocated to congregant shelter operations such as those run by Metro Social Services and the Mayor's Office of Emergency Management at the Fairgrounds. These shelters do not offer adequate protection against coronavirus due to crowding people together. Shelter stays are extremely short. In many cases, people are discharged prior to being out of their 14-day quarantine period after contracting or being exposed to COVID-19 disease.

In addition, the shelter rarely offers support beyond basic needs--such as engaging people experiencing homelessness in the Coordinated Entry process, providing housing navigation, signing them up for currently open public housing lists, or applying shelter guests for public benefits like SNAP, TANF, tax relief, reemployment assistance (unemployment benefits), Veterans benefits, Medicaid or Medicare screening, or Advanced Premium Tax Credits for health insurance. It does not link people to mental health care, substance abuse or addiction treatment, job training, education resources, or a variety of other services that other non congregant, long-term agencies staffed by trained housing navigators offer.

They are also operating at an extremely heavy cost, and not just financial. Seasoned and qualified staff from Metro Social Services were reassigned to shelter operations away from their normal duties in helping families facing or experiencing homelessness access resources. However, they are rarely using their skill sets to help find permanent housing and instead focusing on daily operation of a facility where registered sex offenders, domestic violence victims, Veterans, people with untreated mental health

disorders that have all been exposed to a potentially deadly virus are expected to cohabitate peaceably in a shared space.

Again, I would encourage the use of funding to pay for resources to provide immediate safety to folks by housing them in decentralized locations like motel/hotel rooms and linking them to financially-supported housing navigation staff that are equipped to leverage these funds for permanent housing and not just short-sighted relief.

This plan is working for Veterans who use SSVF to find housing and a pilot project with Community Care Fellowship for those with the highest VI-SPDAT scores.

Thanks

Thank you for the opportunity to comment and for being transparent in the process.

### **MDHA Response:**

Nashville-Davidson County has been awarded a total of \$10,038,745 in Emergency Solutions Grant coronavirus (ESG-CV) funding through the CAREs Act. These special funds are to be used specifically to prevent, prepare for, and respond to the coronavirus pandemic (COVID-19) among individuals and families who are homeless or receiving homeless assistance; and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts of COVID-19.

MDHA does not oversee shelter operations at the Fairgrounds. However, Nashville-Davidson County has been assigned HUD Technical Assistance (TA) to coordinate a larger strategy for allocating ESG-CV funding in alignment with best practices for responding to COVID-19 amongst homeless populations.

### **Public Hearing Questions and MDHA Responses:**

- 1. Will there be an opportunity to award CDBG monies towards LITHC/affordable new construction developments?**

#### **Response:**

There is no CDBG-CV funding allocated for new affordable housing construction under this Action Plan. CDBG-CV funding is designated to help low to moderate income families prevent, prepare for and respond to the coronavirus pandemic.

- 2. A similar question has already been asked. But could MDHA submit a request to HUD to be able to allocate CDBG monies to new construction affordable developments? There are several developments that were slated to be built but have been halted as a result gaps that arose during underwriting or in response to COVID-19 and investor expectations.**

#### **Response:**

CDBG funding cannot be used to construct new affordable housing. No guidance from HUD has been released to change this restriction at this time.

- 3. Is there any further breakdown of how ESG funds will be spent? (e.g., \$X for RRH, \$X for shelter, etc.)**

#### **Response:**

The first allocation of ESG-CV funding will be made available to nonprofit providers through a competitive Request for Applications (RFA) process. This process will determine the breakdown of eligible activities funding under this allocation of ESG-CV.

- 4. I have heard of additional "waves" or phases of ESG funding to CoCs. Can you speak to that at all?**

**Response:**

In June, Nashville Davidson County was notified by HUD of a second allocation of ESG-CV funding in the amount of \$8,489,679. These funds are not included in this Substantial Amendment.

- 5. Will the ESG allocations be combined with the normal ESG RFA process?**

**Response:**

No

- 6. Any sense of when the actual monies will be put out through RFP?**

**Response:**

The Substantial Amendment to the 2019 Action Plan will be submitted to the Nashville Metro Council for review. Pending Council approval the Amendment will be submitted to HUD for review and issuance of grant agreements. The RFA process is contingent upon these next steps.

## **Appendix D**

### **Citizens Participation Plan**



## APPENDIX D CITIZEN PARTICIPATION PLAN OF THE CONSOLIDATED PLAN

### **INTRODUCTION**

The Citizen Participation Plan is designed to provide for and encourage citizen involvement in the development, implementation and evaluation of housing and community development programs in Metropolitan Nashville-Davidson County, Tennessee. While the processes contained in this Citizen Participation Plan may be used to address a broad range of public and private resources, this Plan is specifically designed to meet the citizen participation requirements for the Consolidated Plan for housing and community development needs of Metropolitan Nashville- Davidson County. Completion of the Consolidated Plan is required by the U.S. Department of Housing and Urban Development in order for Metropolitan Nashville-Davidson County to receive federal funds allocated through the Community Development Block Grant (CDBG), the HOME Investment Partnerships Program (HOME), the Emergency Solutions Grant (ESG), and the Housing Opportunities for Persons with AIDS (HOPWA) Program.

As the lead agency responsible for the preparation and administration of the Consolidated Plan, the Metropolitan Development and Housing Agency (MDHA) has the primary responsibility for developing and implementing the Citizen Participation Plan. Per the federal regulations found at 24 CFR 91, the citizen participation plan must provide for and encourage citizens to participate in the development of the Consolidated Plan, the annual action plan, any substantial amendments to the Consolidated Plan, and the annual performance report. The plan is designed especially to encourage participation by low- and moderate-income persons, particularly:

- those living in slum and blighted areas,
- in areas where CDBG funds are proposed to be used,
- residents of predominantly low- and moderate-income neighborhoods,
- residents of public and assisted housing developments, and
- residents of targeted revitalization areas in which the developments are located.

MDHA will follow its citizen participation plan to the greatest extent possible. The requirements for citizen participation do not restrict the responsibility or authority of MDHA for the development and execution of its Consolidated Plan. MDHA will provide citizens with a reasonable opportunity to comment on amendments to the citizen participation plan and will make the citizen participation plan public. The citizen participation plan must be in a format accessible to persons with disabilities, upon request.

The Community Development Department of MDHA is the point of contact for all questions, comments, complaints, and requests for technical assistance. The Community Development Department can be contacted by telephone at 615-252-8505 or by e-mail at [comments@nashville-mdha.org](mailto:comments@nashville-mdha.org). Please address all correspondence to:

MDHA Development Department  
Attn: Consolidated Plan  
P.O. Box 846  
Nashville, TN 37202

MDHA will maintain a contact list to keep interested parties informed with updates regarding the Consolidated Plan. To be added to the contact list call 615-252-8505.

## **THE CONSOLIDATED PLAN & ANNUAL ACTION PLAN**

Every five years MDHA develops a long-term strategic plan called the Consolidated Plan. The Consolidated Plan guides the programs that MDHA will undertake each year. In addition to the Consolidated Plan, MDHA must prepare an annual action plan that describes the actions to be taken in a specific program year. To ensure public participation in the development of the Consolidated Plan and annual action plan, MDHA will hold a public hearing, accept public comment, and issue public notices for the Consolidated Plan and for each annual action plan.

### **Public Notice & Publication**

MDHA will publish a public notice in a non-legal section of *The Tennessean* and at least one weekly minority and Hispanic newspaper, to announce the public comment period, at least 10 days before a public hearing. MDHA will also publish a notice on its website. The notice will include a general summary and the location where copies of the entire plan may be obtained. MDHA will also send the notice to all members of the Consolidated Plan contact list. Notices will also be distributed to local elected officials, affordable housing forums/groups, public housing Resident Associations, Continuum of Care membership, and other interested parties and groups.

MDHA is required to publish each proposed plan in a manner that affords citizens, public agencies, and other interested parties a reasonable opportunity to examine its contents and to submit comments. MDHA will provide a reasonable number of free copies of the plan to citizens and groups that request it. MDHA will make every effort to provide reasonable accommodation for reviewing the document upon request. Copies of each plan will be available for review at MDHA and on the MDHA website at: [www.nashville-mdha.org/consolidated-plan](http://www.nashville-mdha.org/consolidated-plan).

### **Public Hearings**

MDHA will hold at least one public hearing per year during the development of the Annual Action plan. The purpose of the public hearings is to obtain citizens' views, respond to proposals, and answer questions. The hearings will address housing and community development needs, proposed activities, and review of program performance. At least one of these hearings is held before the proposed plan is

published for comment.

MDHA will make every effort to provide reasonable accommodations and services to assist persons with disabilities or sensory impairments. Translation services may be offered upon request.

## **Public Comments**

MDHA will provide a period of at least 30 days to receive comments from citizens on each proposed plan. MDHA will consider any comments or views of citizens received in writing, or orally at the public hearings, in preparing the final adopted plan. A summary of these comments or views shall be attached to the final adopted plan.

## **PLAN AMENDMENTS**

In the course of administering the four federal programs, MDHA may need to amend the Consolidated Plan or an annual action plan. When the amendment is significant and meets the criteria set forth below, the change will be considered a substantial amendment and MDHA will undertake additional actions in accordance with the Citizen Participation Plan to ensure citizens have an opportunity to comment. Changes to the Consolidated Plan that do not meet the criteria for substantial amendments and do not require citizen participation are defined as administrative updates. Examples of administrative updates include grammatical or structural edits that do not substantially change the scope or meaning of an activity; and changes in the coding or eligibility determination of a project that does not change the scope, location, or beneficiaries. Records of all amendments will be maintained at MDHA for public review and entered in Integrated Disbursement and Information System (IDIS) as required by HUD.

## **CRITERIA FOR SUBSTANTIAL AMENDMENTS – UNRELATED TO DISASTER/EMERGENCY EVENTS**

If a plan amendment meets any of the following criteria, MDHA will consider the amendment to be substantial and undertake the additional steps described in this section to ensure public participation:

- A fiscal change in any program/project that is increased or decreased by more than 25% of the total allocation of CDBG, HOME, ESG and HOPWA funds for the program year with the following exception:
  - Funds were made available through the process described in the Action Plan and could not be committed/expended due to lack of demand may be reallocated to other eligible activities.
- A change in funding allocation priorities described in the Consolidated Plan,
- A new program not previously described in an annual action plan,

- The deletion of an activity described in the Consolidated Plan, or
- A substantial amendment is required by HUD.

### **Public Notice & Publication**

In the case of any proposed substantial amendment, MDHA will publish a public notice in The Tennessean and at least one weekly minority and Hispanic newspaper to announce the public comment period a minimum of 10 days before a public hearing. The notice will include a summary of the amendment and a list of the locations where copies of the amendment may be examined. MDHA will also maintain a contact list of interested parties and send information regarding the amendment to all members on the contact list.

### **Public Comments**

MDHA will provide a period of at least 30 days to receive comments on the substantial amendment before the amendment is implemented. MDHA will consider any comments or views of citizens received in writing, or orally at public hearings, if any, when adopting the amendment. MDHA will attach a summary of these comments and MDHA's response to the final adopted amendment.

### **DISASTER/EMERGENCY EVENTS THAT REQUIRE EXPEDITED SUBSTANTIAL AMENDMENTS**

For CDBG funding under FY 2019-2020, FY 2020-2021, and the Coronavirus Aid, Relief, and Economic Security Act or CARES Act, participating cities may provide a 5-day notice/comment period of a proposed off-cycle change as allowed under a HUD waiver. This includes any new activities proposed. A public hearing is not required but documentation relative to off-cycle activity planning applies.

Special ESG funding under the CARES Act referred to as ESG-CV to address the COVID-19 pandemic does not have citizen participation requirements that would otherwise apply to ESG funds; however, MDHA will publish how the ESG-CV funding has or will be used on MDHA's website and other appropriate Metro websites.

It may be necessary to expedite substantial amendments to the Consolidated Plan in the event of a declared disaster or emergency. There are three (3) types of disasters/emergency events that necessitate an expedited substantial amendment including (1) Man-Made-disasters, (2) Natural disasters, and (3) Terrorism. Man-made disasters can include chemical spills, mass rioting, power outages, dam failure, plant explosions, etc. Natural disasters can include earthquakes, tsunamis, hurricanes, tornadoes, wild fires, flooding and public health issues such as wide-spread disease such as the recent coronavirus disease 2019 (COVID-19). Terrorism events include bomb threats, biochemical attacks like the spread of anthrax, or cyber-attacks like hacking, phishing, and virus distribution, etc.

These expedited substantial amendments may include funding new activities and/or the reprogramming of funds including canceling activities to meet needs resulting from a declared disaster or emergency. Therefore, the MDHA may utilize CDBG, HOME, ESG, or HOPWA funds to meet these needs with a 5-day public comment period instead of a 30-day public comment period, which is otherwise required for substantial amendments.

With respect to a declared disaster, the MDHA may elect to use CDBG, HOME, or ESG funds to address needs not provided for by the Federal Emergency Management Agency (FEMA) and the Small Business Administration (SBA), or other disaster relief efforts. Funding for disaster relief may not duplicate other efforts undertaken by federal or local sources unless allowed by the federal government. Potential eligible uses of funds are those that are included in the Consolidated Plan or any other CDBG, HOME, or ESG eligible use.

HUD may provide new guidance on eligible uses in which the MDHA will comply with and may utilize as well.

All eligible CDBG activities, including those to address declared disasters or emergencies, must meet one of three national objectives which are: (1) Benefit to low- and moderate-income (LMI) persons; (2) Aid in the prevention of slums or blight; and (3) Meet a need having a particular urgency (referred to urgent need). MDHA may carryout eligible CDBG activities to meet needs resulting from declared disasters or emergencies under any one of the three national objectives.

## **PERFORMANCE REPORTS**

Each year MDHA must submit a Consolidated Annual Performance and Evaluation Report (CAPER) to HUD. This report is due 90 days after the close of the program year. To ensure public participation in the review of the performance report, MDHA will hold a public hearing, accept public comment, and issue public notices.

### **Public Notice & Publication**

MDHA will publish a public notice in *The Tennessean* and at least one weekly minority and Hispanic newspaper to announce the public comment period a minimum of 10 days before a public hearing. MDHA will also maintain a mailing list of interested parties and send information to all members of the mailing list. MDHA will provide a reasonable number of free copies of the performance report to citizens and groups that request it. Copies of each report will be available for review at MDHA and on the MDHA website at: [www.nashville-mdha.org/consolidated-plan](http://www.nashville-mdha.org/consolidated-plan).

### **Public Hearings**

MDHA will hold at least one public hearing per year during the preparation of the annual report. The purpose of the public hearings is to obtain citizens' views, answer questions, address housing and community development needs, and review program performance.

Upon request, MDHA will provide for translation services to meet the needs of non-English speaking residents. MDHA will also take whatever actions are appropriate to serve the needs of persons with disabilities.

## **Public Comments**

MDHA will provide a period of at least 15 days to receive comments on the annual report before the report is submitted to HUD. MDHA will consider any comments or views of citizens received in writing, or orally at public hearings, if any, when preparing the final report. MDHA will attach a summary of these comments and MDHA's response to the final annual report.

## **INFORMATION**

In addition to providing participation in the development of plans and the review of the annual report, MDHA will provide citizens, public agencies, and other interested parties with reasonable and timely access to information and records relating to the Consolidated Plan and the use of federal funds. MDHA will provide access to records for the current program year and previous five program years. This information includes, but is not limited to, the citizen participation plan, the Consolidated Plan as adopted, annual action plans, performance reports, and any substantial amendments. MDHA will make these records available in a form accessible to persons with disabilities, upon request. Most records are maintained at MDHA in the Community Development Department, located at 712 South Sixth Street.

Records may be reviewed by appointment during regular business hours.

MDHA will also provide citizens with reasonable and timely access to local meetings held in regard to the Consolidated Plan and the activities undertaken as part of the Consolidated Plan.

## **TECHNICAL ASSISTANCE**

MDHA must provide technical assistance to groups representative of persons of low- and moderate-income that request such assistance in developing proposals for funding assistance under any of the programs covered by the Consolidated Plan. To request technical assistance, contact the Community Development Department using the contact information listed in the Introduction.

## **COMPLAINTS**

MDHA will maintain a file that documents all citizen complaints and MDHA's response for any complaints related to the Consolidated Plan, amendments, and performance report. MDHA will provide a substantive written response to every written citizen complaint within 15 working days of the receipt of the complaint. In addition, MDHA will

consider these complaints when evaluating program performance as part of the annual report to HUD. Address all complaints to the Community Development Department using the address given in the Introduction.

## **DISPLACEMENT**

Displacement occurs when an individual, family, partnership, association, corporation, or organization moves from their home, business, or farm, or moves their personal property as a direct result of a federally-funded acquisition, demolition or rehabilitation. Generally, displacement does not include persons displaced temporarily from their dwelling for less than 12 months while it is being rehabilitated. Displaced persons and entities are eligible for relocation assistance under federal law.

As a part of this plan, MDHA is required to describe its plans to minimize displacement of persons and to specify the types and levels of assistance MDHA will make available to persons displaced. To minimize displacement, MDHA will avoid the acquisition and demolition of occupied structures. When displacement is necessary and unavoidable, MDHA will offer the following types of assistance.

### For Residential Displacements

- Provide relocation advisory services to displaced tenants and owner occupants
- Provide a minimum 90 days written notice to vacate prior to requiring possession
- Reimburse for moving expenses
- Provide payments for the added cost of renting or purchasing comparable replacement housing.

### For Nonresidential Displacements (businesses, farms, and nonprofit organizations)

- Provide relocation advisory services
- Provide a minimum 90 days written notice to vacate prior to requiring possession
- Reimburse for moving and re-establishment.